

Application or Docket Number

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY | | | OTHER THAN | |
|---|--|---|----------------|--|------------------|------------------|-----------------|----------------|------------------------|----------|----------------|------------------------|
| Ŧ | OTAL CLAIM: | S | (Column 1) | | (Column 2) | | | TYPE | | OR — | | ENTITY |
| FOR | | | | | | | | RATE | FEE | - | RATE | FEE |
| | | | NUMBER | RFILED | NUMBER EXTRA | | | BASIC FE | E 150.00 | OR | BASIC FEE | 300.00 |
| 1 | TAL CHARGE | EABLE CLAIMS | | inus 20= | * | | | X\$ 25= | 1 | OR | X\$50= | 1148 |
| INDEPENDENT CLAIMS | | | 3 minus 3 = * | | | | | X100= | | OR | X200= | |
| M | JLTIPLE DEPE | NDENT CLAIM F | RESENT | | | | | +180= | | OR | +360= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | ı | TOTAL | | OR | TOTAL | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | TOTAL | L., | Jon | OTHER | THAN |
| _ | | (Column 1) | (Column 2) | | | (Column 3) | nn 3) SMALL ENT | | | OR | SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUME PREVIO PAID F | BER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 25= | | OR | X\$50= | |
| | Independent | * | Minus | *** | | = | | X100= | 1 | OR | X200= | |
| | FIRST PRESI | ENTATION OF M | ULTIPLE DE | PENDENT | CLAIM | | | +180= | | 1 1 | +360= | |
| | | | | | | | L | TOTAL | | OR | TOTAL | |
| | | Α | DDIT. FEE | L | OR , | ADDIT. FEE | | | | | | |
| AMENDMENT B | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Colum HIGHE NUMB PREVIOU PAID F | ST ER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 25= | | OR | X\$50≃ | |
| | Independent | * | Minus | *** | | = | t | X100= | | OR | X200= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | H | +180= | | i i | | |
| | | | | | | | L | TOTAL | | OR | +360= TOTAL | |
| | | | | | | | ΑE | DOIT. FEE | | OR A | DDIT. FEE | |
| [| | (Column 1) CLAIMS | | (Columi HIGHE | | (Column 3) | _ | | | | | |
| AMENDMENT C | | REMAINING AFTER AMENDMENT | | NUMBE PREVIOL PAID FO | ER JSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | \[\frac{1}{2}\] | K\$ 25= | | OR | X\$50= | |
| | Independent | * | Minus | *** | | = | | X100= | | | X200= | |
| 1 | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | +180= | | OR | +360= | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE | | | | | | | | | | | | |
| T | he "Highest Num | ber Previously Paid | For" (Total or | Independent | t) is the | highest number | found | I in the app | ropriate box | in colur | mn 1. | |